

County of Santa Cruz

BOARD OF SUPERVISORS

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January 17, 2020

California Department of Public Health Office of AIDS P.O. Box 997377, MS 0500 Sacramento, CA 95899-7377 SEPApplication@chph.ca.gov

Dear Director Angell:

Following a unanimous vote of the Santa Cruz County Board of Supervisors, I am writing to you in opposition to the latest application from the Harm Reduction Coalition of Santa Cruz County (HRCSCC) to operate a Syringe Exchange Program (SEP) in the County of Santa Cruz. There are numerous serious concerns with this application, including the exacerbation of the syringe litter problem in our community, the fact that data shows HRCSCC draws clients away from the County's Syringe Services Program, leaving clients with inferior care and less direct access to treatment, and a completely inappropriate proposed location outside a family homeless shelter. Our Board strongly opposes this application.

For many years Santa Cruz County has had a robust professionally-run Syringe Services Program (SSP) with the goal of protecting and promoting residents' health and safety by preventing the spread of disease associated with injection drug use, and by decreasing the number of improperly disposed syringes in the community. The County's SSP is staffed by medical professionals, maintains two locations, and is well-known and well-utilized. Santa Cruz County has worked very hard to design and implement a Drug Medi-Cal Organized Delivery System which has significantly expanded treatment capacity and the County's syringe program is in the best position to be able to connect injection drug users with treatment.

HRCSCC's current volunteer-run syringe distribution effort undermines and draws clients away from the County's professionally-run locally-authorized syringe exchange program. In Santa Cruz County, while the hours and locations of our SSP were

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constant, the number of unique IDs (clients) that visit one of our sites has dropped drastically (387 visits in Sept. 2017, and only 148 visits in Sept. 2019) and the number of syringes dispensed has increased significantly as a number of volunteer secondary-exchangers associated with HRC have become more active. This secondary exchange activity by community volunteers has diverted injection drug users (who previously visited the County SSP) from the opportunity to see medical professionals who can identify and assist with medical issues, provide testing for diseases, connect clients to treatment and more. In such circumstances, it is a dis-service, and potentially even a danger to injection drug users for the state to authorize a separate syringe exchange program to operate, because clients will shift to a syringe source that will not have the critical medical expertise that our SSP offers. Santa Cruz County has worked very hard (and invested heavily) to design and implement a Drug-Medi-Cal Organized Delivery system which has significantly expanded treatment capacity and the County's syringe program is in the best position to be able to connect injection drug users with treatment such as the County's Medication Assisted Treatment program.

The County-run SSP is accessible and has recently increased hours to become even more accessible. In addition, the SSP is exploring shifting hours to the most optimal times for utilization. The County's SSP continues to allow secondary exchange and provides a range of services.

In our relatively small County of 274,000 residents, our SSP dispensed nearly 600,000 syringes in the last year, which is a per capita rate greater than Monterey County, Santa Clara County and San Mateo County's per capita rates combined. Santa Cruz County is not a community that lacks syringe access. County disease data has been relatively level with a downward trend in newly reported HIV cases and significantly fewer new cases of Hepatitis C reported in 2018. The County's program is already meeting the need for clean syringes and an additional syringe exchange program is unnecessary and harmful.

HRCSCC's application doesn't appear to include oversight and involvement of licensed medical professionals. Santa Cruz County's Syringe Services Program is within the Public Health Division of the County's Health Services Agency, and the program is run with the oversight of professional health staff. Clients deserve the better care that the County's SSP provides.

Our community has struggled with a persistent syringe litter problem for many years and a new syringe program that is not a 1 to 1 exchange is likely to exacerbate this problem. The Office of AIDS should avoid authorizing a syringe exchange program that could exacerbate syringe litter problems. In Santa Cruz County, in the span of less than 11 months, a community clean-up organization picked up nearly 6,000 syringes in public areas. In addition, the City of Santa Cruz Parks Department picked up 3,501 syringes in parks and beaches in 2017 and 4,171 syringes in 2018. Save Our Shores, a local

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environmental non-profit that focuses on clean beaches, has also picked up hundreds of syringes that threaten the health of the Monterey Bay National Marine Sanctuary. While the County's SSP operates on a 1 to 1 basis, the HRC's proposed program would not be a 1 to 1 exchange, which is very likely to exacerbate the syringe litter problem. The public health impacts and environmental impacts of syringe litter must be considered.

Santa Cruz County has worked hard to address syringe litter, which we see as a public health issue that needs to be taken seriously. In order to deal with syringe litter, Santa Cruz County has placed sharps kiosks in multiple locations, required local pharmacies to participate in a sharps take-back program, and the County's Syringe Services Program provides sharps containers and urges clients to dispose of syringes property.

Yet, despite these efforts, the syringe litter problem has persisted. When syringe litter reaches the volumes that is has in Santa Cruz County (particularly in the City of Santa Cruz) there are significant, far reaching public health impacts, as some parents don't feel safe bringing their children to local parks and open spaces, using local public bathrooms, and participating in summer recreational programs on the beach due to concerns that their children will step on syringes. These concerns are not unfounded as many County residents have reported needle sticks throughout the years. Residents should not have to live this way. The public health impacts and environmental impacts of syringe litter must be considered.

Furthermore, HRCSCC's proposed location, adjacent to the County's only family shelter, is completely inappropriate and would create further community impacts to our most vulnerable residents. This shelter provides emergency housing for approximately 90 individuals, including 28 households with children. While families are stabilizing in the shelter and working toward obtaining permanent housing, children from these families should not have to endure volunteer-run syringe distribution outside their building every Sunday, and they deserve your consideration. Additionally, the Housing Matters campus on Coral Street includes shelter beds for homeless individuals, some of whom have struggled with addiction and are working hard to stay clean. A syringe distribution program that draws substance abusers, and potentially drug dealers, to that area only makes it harder for the individuals in recovery to resist the temptation to use drugs.

The Board's goal is to protect and promote all residents' health and safety. Our Board has consistently supported the continuation of the County's SSP even though it has been controversial at times. The County's SSP is more accessible than ever and access to treatment has been increased. HRCSCC's application is opposed by all five members of the Board of Supervisors, local law enforcement leaders, and thousands of Santa Cruz County residents. If the State approves the Harm Reduction Coalition's application, there will likely be worse outcomes for injection drug users as they are drawn away from the County SSP (as has been documented) and toward an entity that

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doesn't have strong treatment connections, and isn't run by professionals. If the application is approved, it will harm our community, will further polarize our community on this difficult issue, and would jeopardize the effectiveness of the County's Syringe Services Program. What would be best for injection drug users and best for the larger community (not to mention the environment) would be to support the County's professionally-run SSP which has the ability to change lives for the better and to deny HRCSCC's application, which would draw clients to an inferior service, potentially putting them in danger. Injection drug users and our larger community deserve better. Our Board voted unanimously to express our opposition to this application to the State.

Please take our comments into consideration and deny this application.

Sincerely.

RYAN COONERTY, Chair Board of Supervisors

RC:jfr

CC: Assemblymember Mark Stone
Senator Bill Monning
Health Services Agency Director Mimi Hall
Public Health Officer Dr. Gail Newel
City of Santa Cruz
City of Watsonville
City of Capitola
City of Scotts Valley
Santa Cruz County Sheriff Jim Hart
Santa Cruz Police Chief Andy Mills
Watsonville Police Chief David Honda
Scotts Valley Police Chief Steve Walpole
Capitola Police Chief Terry McManus